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INSTRUCTIONS: This form should be used by a propriate of the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the arent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

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23599 759	0 03/22/2006					
	E, ZELANO & BRA	NIGAN, P.C.	I hereby certify that States Postal Servic addressed to the M transmitted to the U	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
ARLINGTON, VA	22201		(Depositor's name)			
					(Signature)	
					(Date)	
APPLICATION NO.	PPLICATION NO. FILING DATE FIRST		ED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/497,891 TTLE OF INVENTION: 16	02/04/2000 -HYDROXYESTRATRIEN	Herma NES AS SELECTIVELY AC	nn Kuenzer TIVE ESTROGENS	SCH-1692	8032	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO NO	\$1400	\$0	\$1400	06/22/2006	
EXAM		ART UNIT	CLASS-SUBCLASS	\neg		
OAZI, SAB		1616	552-553000			
	address or indication of "F		rinting on the patent front page	e, list Millen, White, Z	dano & Brania	
FR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON PLEASE NOTE: Unless an assignee is identified below, no assignee			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type) adata will appear on the patent. If an assignee is identified below, the document has been filed for DT a substitute for filing an assignment.			
recordation as set forth in (A) NAME OF ASSIGNI			te for filing an assignment. DENCE: (CITY and STATE O			
SCHERING AG			Berlin, Germany			
Please check the appropriate	assignee category or category	ories (will not be printed on the	e patent):	Corporation or other private gr	roup entity Government	
ia. The following fee(s) are enclosed: State Stat			4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-3492 (enclose an extra copy of this form).			
a. Applicant claims St	MALL ENTITY status. See	37 CFR 1.27.		MALL ENTITY status. See 37 C		
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Authorized Signature	1513. D	<u> </u>		June 20, 20		
Typed or printed name	Harry B. Sh			145000 HARARIES BODOOSS		
Alexandria, virginia 22010-	1750.	311. The information is required 12 and 37 CFR 1.14. This CO. Time will vary depending hould be sent to the Chief Inf SEND FEES OR COMPLET is are required to respond to a series of the completed in the complete in the comp		69 1549 aublic which is to file (at 12 minutes to complete, including comments on the amount of the and Trademark Office, U.S. Department of the action of		